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FEC	
FORM	1

STATEMENT OF

FORM 1	ORGANIZATION		Office Use Only		
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Λ .	g for l	. –	ter, Americ	a, Po	litical.
ADDRESS (number a	nd street)	BOK 15	174		
(Check if a is changed)		s.h.i.n.g.t.o.	<u>/\ </u>	PCI	12.0.00.31-
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	address [Y])		mail address)		
COMMITTEE'S WEE	PAGE ADDRESS (URL)			
(Check if is change					
2. DATE 08 19 20 0					
3. FEC IDENTIFICATION NUMBER					
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)					
I certify that I have	(0.	nent and to the best	of my knowledge and belief it), Whetsell	is true, correct	and complete.
Signature of Treasur	er	m tulletær	<u>\$</u>	Date 03	3'19'2010
NOTE: Submission of			may subject the person signing to		the penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)